



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Hoshida	Sandra	Y.	(808) 543-9491
MAILING ADDRESS (Street)			FAX
P. O. Box 3288			(808) 543-9450
(City)	(State)	(Zip Code)	
Honolulu	HI	96801-3288	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		
Young Brothers, Limited		
TELEPHONE		
(808) 543-9311		
MAILING ADDRESS (Street)		
P. O. Box 3288		
FAX		
(808) 543-9458		
(City)	(State)	(Zip Code)
Honolulu	HI	96801-3288
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		
P. Roy Catalani		
TELEPHONE		
(808) 543-9409		
MAILING ADDRESS (Street)		
P. O. Box 3288		
FAX		
(808) 543-9458		
(City)	(State)	(Zip Code)
Honolulu	HI	96801-3288

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input checked="" type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | _____ |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

Sandra Hoshide

12-28-06

(Signature of Lobbyist)

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Glenn K. Y. Hong	President

NAME OF ORGANIZATION (if applicable)

Young Brothers, Limited

TELEPHONE

(808) 543-9322

MAILING ADDRESS (Street)

P. O. Box 3288

FAX

(808) 543-9458

(City)

Honolulu

(State)

HI

(Zip Code)

96801-3288

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

Glenn K. Y. Hong
(Signature of Authorizing Officer or Person Represented)

12/29/06

(Date)